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Total Number of Pages in This Submission **2** Attorney Docket Number **DON01 P-1152**

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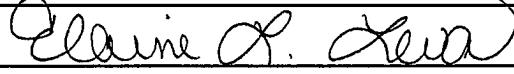
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request For Continued Examination
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
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Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Van Dyke, Gardner, Linn & Burkhart, LLP		
Signature			
Printed name	Timothy A. Flory		
Date	August 7, 2007	Reg. No.	42540

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Signature			
Typed or printed name	Elaine L. Leva	Date	August 7, 2007

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